

TARGET2 form for collection of Static Data – Main Form for setting up a TIPS Party –

Page 1 of 4

A,B	PARTY BIC:		PARENT BIC:	
C,D,E	New	Modify	Close	
F,G,H	Production	Pre-Production	Date:	
I,J	Ref:		rel. Ref:	
K,L	Activation date:		Responsible CB:	

1. Party		Relevant GUI Screen
11	Party Long Name: _____	<i>Party – new/edit</i>
12	Party Short Name: _____	
13	Party Type:	
14	Address	
14a	Street: _____	
14b	House Number: _____	
14c	Postal Code: _____	
14d	City: _____	
14e	State or Province: _____	
14f	Country Code: _____	

2. Party Service Link		
21	Service	<i>Party Service Link – new/edit</i>
22	Party Type	

TARGET2 form for collection of Static Data

– Main Form for setting a TIPS Party –

Page 2 of 4

New	Modify	Close
BIC:	PARENT BIC:	Activation date:

3. Technical Addresses

*Technical
Address
Network
Services Links –
new/edit*

31 Technical Address (notifications) Network Service Name

32a Technical Address (reports) Network Service Name

32b

32c

32d

32e

33a Technical Address (instant messaging) Network Service Name

33b

33c

33d

33e

33f

33g

33h

33i

TARGET2 form for collection of Static Data

– Main Form for setting a TIPS Party –

Page 3 of 4

New	Modify	Close
BIC:	PARENT BIC:	Activation date:

4. Access rights management - Roles

41	Role	Two-eyes mode	Four-eyes mode	Grant/Revoke roles
	Party Administrator			
	PB Access rights administrator - Advanced			
	PB Reading role			
	PB Configuration Manager			
	PB Liquidity Manager			
	PB CMB Set-up Manager			
	PB CMB Manager			
	PB TIPS Query Manager			
	PB TIPS Configuration Manager			
	PB Instant Payment Manager			
	PB TIPS Liquidity Manager			
	PB TIPS Party Query Manager			
	PB Reachable Party Manager			
	PB BILL-Reader			
	PB TIPS-Access			
	PB CRDM-Access		n.a	

TARGET2 form for collection of Static Data – Main Form for setting a TIPS Party –

Page 4 of 4

New	Modify	Close
BIC:	PARENT BIC:	Activation date:

The Undersigned declare(s) to have the full capacity and authority to execute the TIPS Static Data form

The Undersigned furthermore declare(s) that TIPS Participant Party opened with this form has adhered to the SEPA Instant Credit Transfer (SCT Inst) scheme of the European Payments Council

Date, Name(s) Signature